

**Aboriginal cultural competency in
dietetics: A national survey of
Canadian Registered Dietitians (RDs)**

Northern Health Research Conference

June 25, 2016

Conflict Disclosure Information:

Presenters: Paige Huycke and Jill Ingribelli

Title of Presentation: Aboriginal cultural competency in dietetics: A national survey of Canadian Registered Dietitians (RDs)

We have no financial or personal relationships to disclose

 **NODIP-46 weeks**

Cultural Competence in Dietetics

- Low levels of cultural self-efficacy, discomfort
- Need to address discomfort and assemble strategies
- Few courses offered in cultural competence
- Dietetics students feel underprepared to counsel clients from other cultures

Objective

- To inform dietetic practicums, including NODIP, as well as practicing Registered Dietitians (RDs) on the key health and cultural competencies that are essential to improving dietetic services and client-centered care for diverse populations of Aboriginal peoples across Canada.

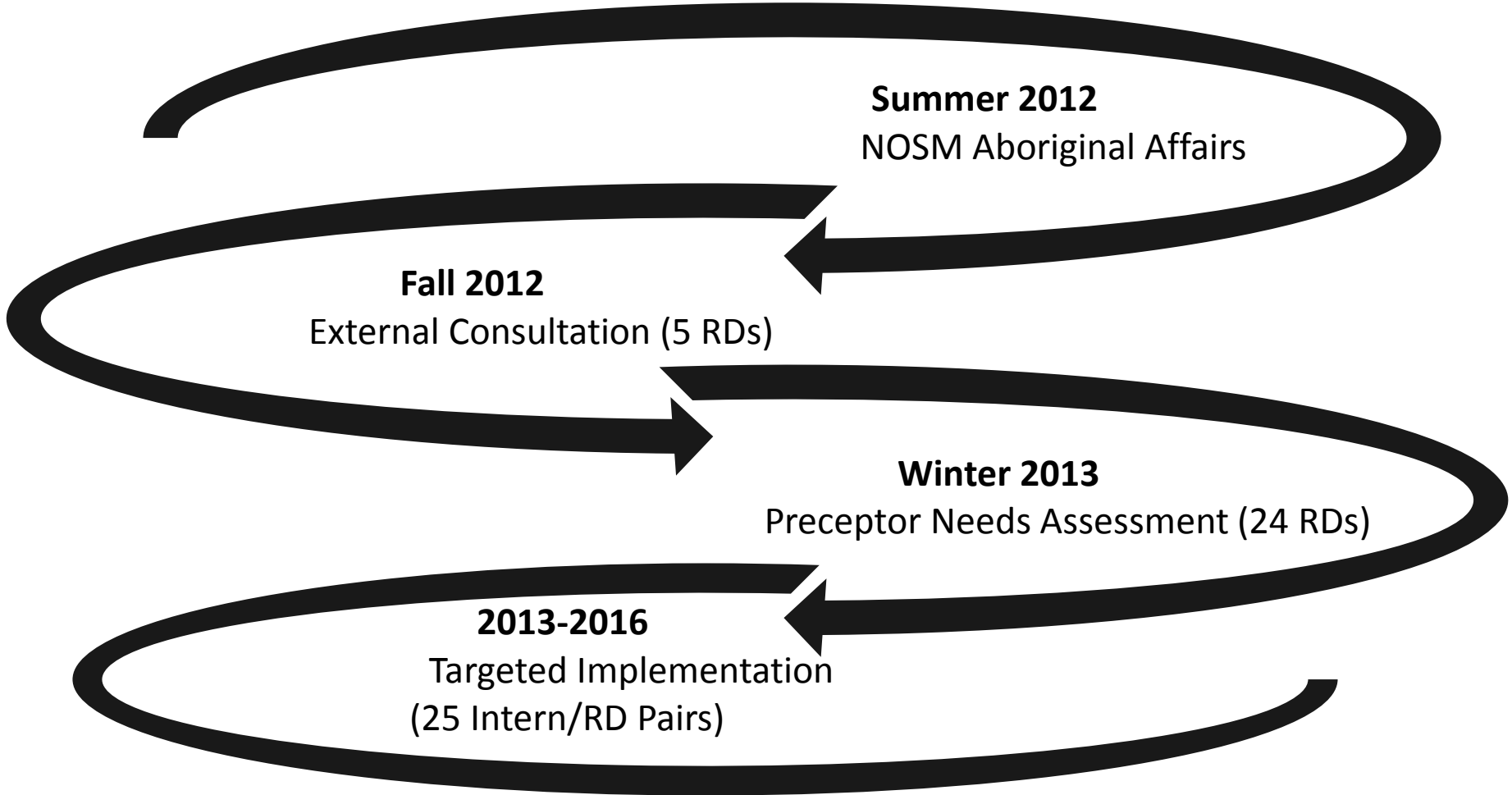
Consultation and Evaluation

Summer 2012
NOSM Aboriginal Affairs

Fall 2012
External Consultation (5 RDs)

Winter 2013
Preceptor Needs Assessment (24 RDs)

2013-2016
Targeted Implementation
(25 Intern/RD Pairs)



Model of Cultural Competence for Education and Training of RDs

**Multicultural
nutrition counselling
skills**



**Multicultural food
and nutrition
knowledge**

Methods

14-item Online survey (Fluid Surveys[©])



Pre-test (n=4)



Survey administered to respondents (n= 145)



Results quantitatively analyzed (Microsoft[®] Excel[®])

Results



Health and Cultural Competencies

90-98%



Food and Nutrition Competencies

86-100%



Culturally Competent RDs/Interns

95%

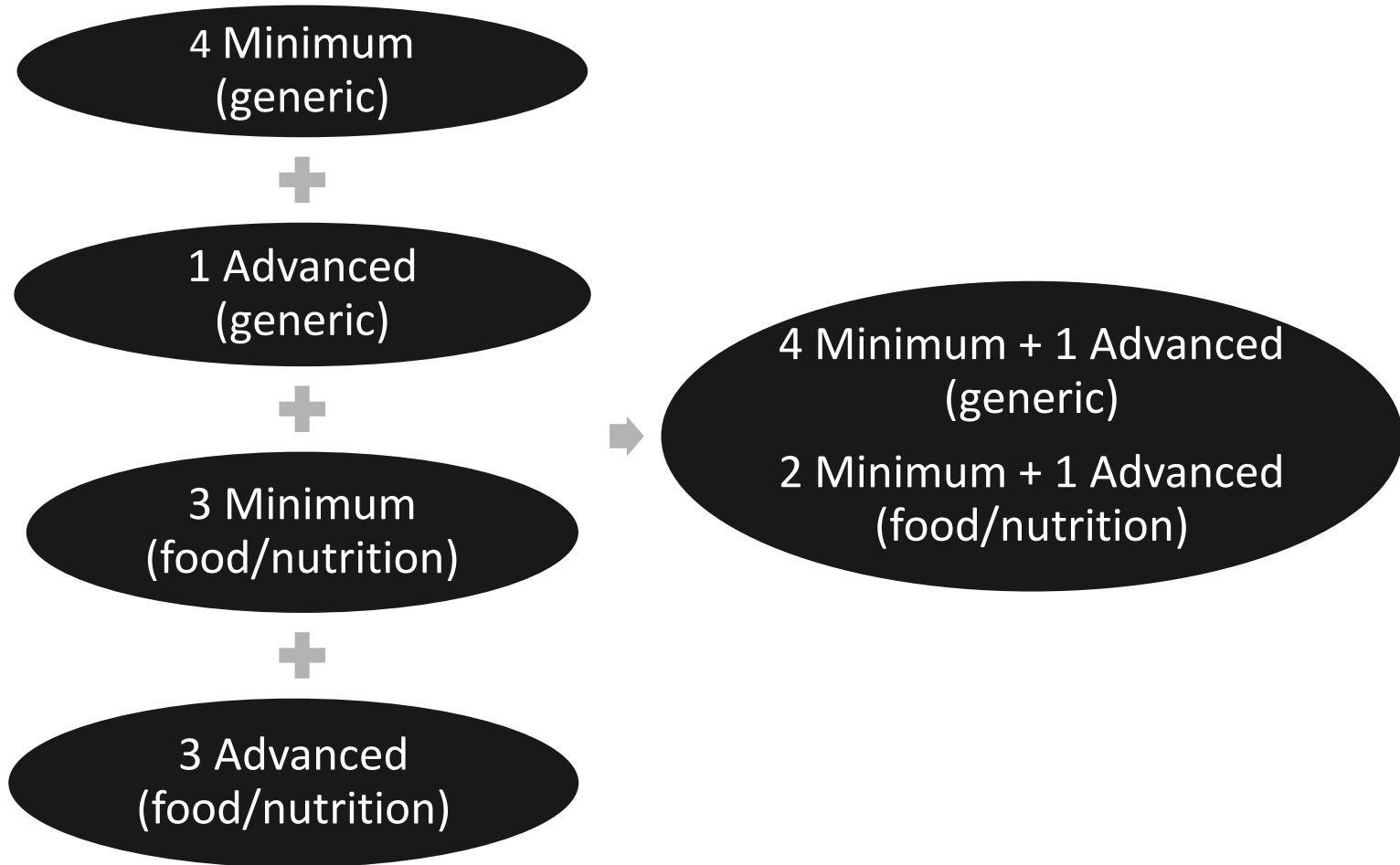
Results

Competency	Top 3 n(%)	Bottom 2 n(%)	Average Ranking of Scores
Historical and cultural factors affecting the health status (Minimum).	32 (78%)	9 (22%)	2.12
Socio-demographic profile and heterogeneity (Minimum).	21 (51%)	20 (49%)	3.41
Traditional and non-traditional healing and wellness practices; elders and healers (Minimum).	23 (56%)	18 (44%)	3.29
Issues and strategies to improving access to culturally appropriate health services (Minimum).	25 (61%)	16 (39%)	2.98
Approaches to reaching Aboriginal people at an individual and/or population level (Advanced).	31 (74%)	11(26%)	2.50

Results

Competency	Top 3 n(%)	Bottom 3 n(%)	Average of Ranking Scores
Knowledge about diverse eating patterns and traditions (Minimum).	21 (51%)	20 (49%)	3.22
Knowledge about diverse cultures (Minimum).	26 (63%)	15 (37%)	2.98
Understand cultural implications of food access, selection, preparation, and storage (Minimum).	32 (78%)	9 (22%)	2.44
Accommodate diverse patients/clients using available food systems (Advanced).	22 (54%)	19 (46%)	3.32
Develop culturally-appropriate treatment and/or interventions at an individual/population level (Advanced).	28 (68%)	13(32%)	2.76
Develop culturally-appropriate recipes and menus (Advanced).	7 (17%)	34 (83%)	4.80

Draft and Final Competencies



Future Research and Practice Implications

- Six minimum and 2 advanced competencies further developed, implemented and evaluated within NODIP
- Consultation with other dietetic internship programs to strengthen results and narrow gap in curriculum
- Collaboration between undergraduate and postgraduate programs to optimize training

Conclusions

- Dietetic graduates require the requisite attitudes, knowledge and skills to deliver culturally competent services
- Ultimate goal is cultural-self efficacy
- TRC Calls to Action:
 - Provide cultural competency training for all healthcare professionals (#23iii)
- Discipline specific education and training

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